



Patients Before Paperwork

A Progress Report on ACP's Initiative to Reduce Administrative Burdens on Members

October 1, 2015

ACP is pleased to provide our members with this first in a series of progress reports on our ongoing *Patients Before Paperwork* initiative. Thanks to your feedback, the College has identified three priority areas on which this initiative will focus—usability of electronic health records (EHRs), quality reporting, and challenges in dealing with insurance companies. Each progress report will provide an update on ACP activities related to one or more of these priorities, with this inaugural report outlining the College's advocacy with regard to the Medicare EHR Incentive Program (i.e., Meaningful Use).

Easing the Burden of Complying with Medicare Meaningful Use Regulations

MU Stage 2:

- **What's the problem?**

CMS's **Stage 2 requirements** for participation in the Medicare EHR Incentive Program (Meaningful Use (MU)) are creating unreasonable barriers for physicians and other Medicare eligible professionals (EPs), putting them at risk of substantial Medicare payment reductions (penalties). In 2017, physicians can be subjected to an additional 3 percent penalty for not meeting stage 2 MU requirements in 2015. MU requirements are also contributing to physicians' frustration with the functionality of their EHRs.

- **What's ACP doing about it and what have we accomplished so far?**

For the 2014 – 2016 reporting and incentive period, [through our advocacy](#), the College succeeded in persuading CMS to make the following improvements:

- The reporting period was reduced from one year to one quarter.
- Physicians and other EPs who were eligible to participate in Stage 2 were not required to do so, rather all EPs could choose to report using Stage 1 criteria.

Even with these positive changes for 2014, ACP has [continued to advocate](#) for further improvements for Stage 2 in 2015. And CMS appears to be listening, as the Agency has proposed some significant **modifications to Stage 2 for 2015**, many of which are directly in response to the concerns we raised in our letter, including:

- To Reporting Periods –
 - For Hospitals - The reporting period was changed to be the calendar year for all hospital participants (replacing the previous requirement that it be the fiscal year).
 - For Physicians – The reporting period, which had previously been finalized as a full year for 2015—an unreasonably high bar – was replaced with a 90-day reporting period.
- To Measures –
 - Stage 2 Objective for Patient Electronic Access, measure #2 – the threshold to be successful on this measure was revised to be “equal or greater than 1” from the previous requirement of 5 percent. This is an important change as many clinicians have found this and the measure described below to be the most difficult to achieve. Moving the threshold from 5 percent to 1 patient makes this measure achievable.
 - Stage 2 Objective for Secure Electronic Messaging – the threshold to be successful on this measure was changed to be a yes/no response to indicate that this functionality is fully enabled from the previous requirement that this be a percentage-based measure. As noted above, many clinicians have found this to be tremendously difficult to achieve. Therefore, moving the threshold from 5 percent to simple attestation makes this measure achievable.
 - Consolidated all of the public health reporting objectives into a single objective that follows the structure of what has now been proposed for Stage 3. The previous menu structure for this objective made it impossible for many clinicians to identify a set of public health reports that worked for them in their location.

These proposed changes would dramatically improve Stage 2 and are a direct response to our recommendations—showing that CMS is continuing to listen. While we have still argued that many of the Stage 2 provisions need further improvement, ACP’s Medical Informatics Committee (MIC) members feel that, if the proposed stage 2 modifications become finalized, our members would find them much more manageable, and that attestation would be doable.

- **What more needs to be done?**

Unfortunately, as of September 30, 2015 CMS still has not finalized the improvements that they have proposed for Stage 2 in 2015. In July and again in September, ACP signed on to multi-stakeholder letters to the Secretary of HHS, asking for immediate finalization of the MU regulations for the 2015-2017 reporting and incentive period. The late timing

of CMS issuing this final rule means that it is now too late for most clinicians to complete MU in 2015. Therefore, the MIC is mobilizing to be ready for when CMS does release these final regulations in the event that the Agency does not address this significant timing problem through extensive hardship exemptions or other means. If these issues are not addressed, we will push back on CMS, potentially pursue legislative interventions, and prepare practical advice for our members. It is critical that CMS' delay not result in unfair penalties to physicians!

- **Does ACP have practical resources to help members with meaningful use?**

Yes! Members can find information and resources under Meaningful Use on the [health information technology](#) section of the ACP website. This information includes: an EHR Incentive Program participation timeline, tip sheets, pocket guide, and much more.

Additionally, deadlines that pertain to MU can be found on the [Physician and Practice Timeline](#). Clicking on the MU badge will take you to additional information and tools. Also, you can sign up for deadline alerts for MU and other regulatory programs by texting **ACPtimeline** (no space) to 313131 from your mobile phone.

MU Stage 3:

- **What's the problem?**

The EHR Incentive Program was originally comprised of 3 Stages with timelines for completion. Therefore, the critical changes we are seeking to Stage 2 for the 2015 reporting period have an important impact on how **Stage 3** may be implemented. Additionally, in 2015, the Medicare Access and CHIP Reauthorization Act (MACRA) was passed by Congress—a law that significantly changes how physicians will be paid under Medicare, including via the integration of MU with the Physician Quality Reporting System (PQRS) and the Value-Based Payment Modifier Program. This law also has a direct impact on the implementation of Stage 3.

- **What's ACP doing about it?**

Earlier in 2015, ACP provided a [robust set of comments](#) to CMS on their proposed rollout of Stage 3. In these comments, we again argued against most of the proposed measures, as we have done for Stage 2. However, the College's key message, which now has been picked up by most of the other major physician societies, is that **Stage 3 must be paused and reworked** to meet the needs of the new reporting program being established by the MACRA law. CMS has not yet finalized their regulations for Stage 3, but again the MIC is mobilizing to be ready in the event that the Agency does not address our concerns and recommendations.

- **What have we accomplished so far?**

While CMS has not yet finalized the regulation for Stage 3, the College, along with other societies and key stakeholders, has continued to push our key message that **Stage 3**

must be paused and reworked to meet the needs of the new reporting program being established by the MACRA law. Given the current rules that the Agency must follow for establishing new regulations, it may be challenging for them to immediately pause Stage 3 implementation; however, CMS has been more and more responsive to our calls for changes to MU and other health information technology issues, so we are optimistic that they will take some action to address the significant issues that we have raised.

- **What more needs to be done?**

The College's focus is now largely on making significant improvements to MU—and ideally pausing further implementation of the entire MU program—as well as on improving the PQRS and the Value-Based Payment Modifier programs as they all are being integrated into the new reporting program being established under MACRA.

We invite all members to contribute to pushing this message—CMS must postpone Stage 3 to improve it! Therefore, we are asking you to share your own stories of the challenges you are facing with MU either directly with ACP staff via policy-regs@mail.acponline.org or via a new website established by the AMA: <http://breaktheredtape.org/>.